

Testimony on SB 149  
AAC Improved Social Worker to Resident Ratios in Nursing Homes  
February 10, 2011

My name is Jennifer Bennett and I am a nursing home social worker. I enjoy being invited and allowed by the resident to be involved in their life while they are in my care and I like being a social worker. In my job, I am responsible for the resident from the beginning to the end. My duties include helping the resident get admitted to the facility by assisting admissions, looking at their medical diagnosis, their financial status- what insurance do they have and how will this bill get paid, do they have Social Security, Medicare/Medicaid or do they qualify for any of these programs, are they responsible for themselves or do they have a legal representative like a conservator, what is their advanced directives needs- do they want CPR or not, what are their end-of-life needs or concerns or wishes, do they have any final arrangements made- in case they die in my care, what are their religious beliefs, are they involved in the legal system with any charges pending or previous history, their family situation- are they single or married and who in their family is involved in their lives, do they have any children, what is their education, what is their occupation or did they ever work, were they in the armed services or was their spouse, are they a smoker, are they going to be short-term or long-term, what do they want out of their stay, where will they go if they're discharged, who will take care of them, do they have a substance abuse history, do they have mental illness, do they have memory impairment, are they disabled, what has happened to them before they got to us and where do we go from here, what care do they need and what are their discharge planning needs. These are many of the questions and issues I deal with regularly. The regulations make me complete a social work assessment upon admission, document every quarter on each resident that I am responsible for and if anything happens along the way then I must document that as well. I work with residents who have mental illness/mental health issues, complex medical health issues and residents with memory impairment. I face many challenges each day with my residents. Along with being responsible for my residents, I am also involved with their families, case workers and anyone else that is involved in their care. That means that I document all the time which leaves less time to be with my residents. As a social worker in a nursing home, I am responsible for my caseload, along with completing all necessary paperwork required, work with Admissions to help ease the adjustment of the resident, and attend meetings. That is a lot of work in addition to being there for my residents, families and staff.

In October 2010, there was a new, updated assessment called MDS 3.0 (Minimum Data Set) that launched. All nursing home staff that completed MDS's, had to go to training to learn how to complete the new assessment. The old MDS 2.0 was a smaller version and an Admission MDS 2.0 was 10 pages, the new MDS 3.0 is 38 pages. With the increase in number of sections and requirements for social workers for completing MDS 3.0, it takes longer for us to accomplish this task. This also adds to our work load. While I appreciate time with my residents, I am very busy to make sure that I am able to complete the MDS properly and on time and that all necessary documentation such as MDS, Care Plans and Social Service Notes are all done within the time limit.

Then you have to look at staffing ratios. The code for social service workers in nursing homes is one 40 hour per week worker to 120 residents. That is not fair. It makes it difficult to take care of my residents when I do not have enough time to do it and then I must document on everything I do and attend a meeting about it. Then, there are workers with lesser degrees trying to do the same job. The code allows someone with only an Associate's Degree to do the job that I do and I do not think that is a good idea. I feel that my Master's Degree in Social Work has helped prepare me for this work. The theories, research, framework and understanding of human behavior that I learned make the job easier to navigate. My residents deserve someone who has the knowledge and education to help them. I have taken classes

in working with persons with mental health and substance abuse issues, memory impairment and working with older adults. All of this training and education make me better equipped to handle things that my residents bring my way. I love being a social worker, but I feel that my residents deserve the best, so we should give it to them. We should give nursing home residents educated, qualified workers who have the time to devote to them.

Thank you,

Jennifer Bennett, MSW  
Nursing Home Social Worker